

FHA CONSTRUCTION NOTICE

STATE OF NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF LAND USE REGULATION
P.O. BOX 439, TRENTON, NJ 08625
(609) 777-0454

1. PLEASE COMPLETE THIS FORM AND RETURN IT TO THE ABOVE ADDRESS AT LEAST 7 DAYS BEFORE CONSTRUCTION.

PERMIT PREPARED BY (see front of permit) _____

PERMIT NUMBER _____

ISSUANCE DATE _____ EXPIRATION DATE _____

PERMIT/S ISSUED TO _____

DATE CONSTRUCTION IS SCHEDULED TO BEGIN _____

2. THE UNDERSIGNED:

- 1) HEREBY GIVES NOTICE THAT CONSTRUCTION ON THIS PROJECT IS SCHEDULED TO BEGIN AS INDICATED ABOVE, AND
- 2) UNDERSTANDS THAT ALL WORK AUTHORIZED BY THIS PERMIT MUST BE COMPLETED BY THE EXPIRATION DATE.

SIGNATURE _____ DATE _____

NAME AND AFFILIATION _____

DESIGNATED CONTACT PERSON (if different) _____

ADDRESS _____

ADDRESS _____

TELEPHONE _____ FAX _____

3. PLEASE NOTE:

THE STATE OF NEW JERSEY RESERVES THE RIGHT TO REVOKE THE ABOVE PERMIT/S WITH DUE CAUSE AT ANY TIME IF THE APPLICANT OR ITS AGENT HAS VIOLATED ANY TERM, CONDITION OR LIMITATION. PLEASE KEEP A COPY OF THIS AND ALL NJDEP PERMITS AND APPROVED DRAWINGS ON SITE THROUGHOUT CONSTRUCTION.